

BEST AVAILABLE COPY

APPLICATION DATA SHEET

Inventor Information

Inventor One Given Name: THOMAS
Family Name: NISSL
Name Suffix:
Mailing Address Line One: Gillmoor 15
Mailing Address Line Two:
City: 21441 Garstedt
State or Province:
Postal or Zip Code:
City of Residence:
State or Prov. of Residence:
Country of Residence: Germany
Citizenship Country: Germany

Inventor Two Given Name:
Family Name:
Name Suffix:
Mailing Address Line One:
Mailing Address Line Two:
City:
State or Province:
Postal or Zip Code:
City of Residence:
State or Prov. of Residence:
Country of Residence:
Citizenship Country:

BEST AVAILABLE COPY

Inventor Three Given Name:

Family Name:

Name Suffix:

Mailing Address Line One:

Mailing Address Line Two:

City:

State or Province:

Postal or Zip Code:

City of Residence:

State or Prov. of Residence:

Country of Residence:

Citizenship Country:

Given or Company Name of Applicant:

Family Name, if any:

Name Suffix:

Authority Code:

Mailing Address Line One:

Mailing Address Line Two:

City:

State or Province:

Postal or Zip Code:

City of Residence:

State or Prov. of Residence:

Country of Residence:

Citizenship Country:

BEST AVAILABLE COPY

Correspondence Information

Name Line One: Henry M. Feiereisen
Name Line Two: Henry M. Feiereisen, LLC
Address Line One: 350 Fifth Avenue
Address Line Two: Suite 4714
City: New York
State or Providence: NY
Country:
Postal or Zip Code: 10118
Telephone: (212)244-5500
Fax: (212)244-2233
Electronic Mail: info@feiereisenllc.com

Application Information

Title Line One: STENT
Title Line Two:
[Repeat for any additional lines]
Suggested classification:
Suggested Tech. Center:
Total Drawing Sheets: 3
Suggested Dwg. Figure for Pub.:
Docket Number: NISSL-2
Application Type: [Utility] Utility
Licensed US Govt. Agency:
Contract or Grant Numbers One:
Contract or Grant Numbers Two:
Secrecy Order in Parent Appl.?
if plant patent app.,
Latin Name of genus and species of plant claimed:

BEST AVAILABLE COPY

Representative Information

Representative Number One: 020151

Representative Number Two:

[Repeat for extra registration numbers]

BEST AVAILABLE COPY

Domestic Priority Information

This application is a: US-National Phase of International Application
Application One: PCT/DE2005/000018
Filing Date: January 11, 2005

which is a:

Application Two:

Filing Date:

[repeat if necessary]

Foreign Application Information

Foreign Application One: 10 2004 022 044.1
Filing Date: May 3, 2004
Country: Germany
Priority Claimed: Yes

Assignee Information

Assignee Name: QUALIMED INNOVATIVE
MEDIZINPRODUKTE GMBH
Address Line One: Boschstrasse 16
Address Line Two:
City: 21423 Winsen
State or Province:
Country: Germany
Postal or Zip Code: